

03:36p

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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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DIVERSA CORPORATION
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Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/663,620	09/15/2000	Jay M. Short	DIVER1140-3	2110

TITLE OF INVENTION: COMBINATORIAL SCREENING OF MIXED POPULATIONS OF ORGANISMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	06/01/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
NASHED, NASHAAT T	1652	435-400000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Diversa Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

San Diego, CA USA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50 70661 (enclose an extra copy of this form).

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☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Carolyn Erickson

Date

4-1-05

Typed or printed name

Carolyn Erickson

Registration No.

47,550

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PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

OMB 0651-0033

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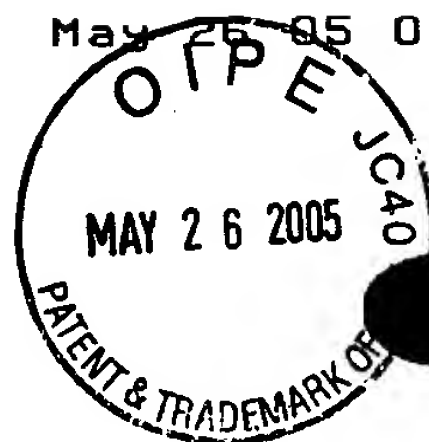
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FAX COVER

TO: Mail Stop ISSUE FEE
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FAX: 703-746-4000

FROM: Carolyn Erickson

FAX: 858-526-5604
PHONE: 858-526-5104

DATE: May 26, 2005

PAGES: 2 (Including facsimile cover page)

If you do not receive all pages, please call 858-526-5104 as soon as possible.

Attorney/Agent Docket No.: DIVER1140-3
Customer No. 29062

Applicant	: Jay M. Short	Art Unit	: 1652
Appl No.	: 09/663,620	Examiner	: Nashed, Nashaat T
Filed	: 9/15/2000	Confirmation No.:	2110
Title	: Combinatorial Screening of Mixed Populations of Organisms		

Papers attached:

➤ Part B - Fee(s) Transmittal form (1 page)

Diversa Corporation
4955 Directors Place, San Diego, California 92121
Tel: (858) 526-5100 / Fax: (858) 526-5050

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